DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10006879-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	EM FOR M	ODELING DIELECTRIC	LOSSES IN A TRAN	SMISSION LINE					
the specification of w	vhich is att	ached hereto unless th	e following box is cl	hecked:					
•	() was filed on as US Application Serial No. or PCT International Application Number and was amended on (if applicable).								
I hereby state that I including the claims, disclose all information. Foreign Application(s) and/	have revi as amend on which is for Claim of F	ewed and understood led by any amendmen material to patentabilit oreign Priority	the contents of th t(s) referred to about ty as defined in 37 (e above-identified specification, ve. I acknowledge the duty to					
inventor(s) certificate listed	d below and l		y foreign application for	patent or inventor(s) certificate having a					
COUNTRY	Т	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119					
				YES. NO.					
				YES: NO					
Provisional Application									
I hereby claim the benefit below:	under Title	35, United States Code Sec		ed States provisional application(s) listed					
	APPI	LICATION SERIAL NUMBER	FILING DATE						
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APPLICATION SERIAL NUMBER				arred between the filing date of the prior					
APPLICATION SERIAL NU		rnational filing date of this ap	oplication:	(patented/pending/abandoned)					
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POWER OF ATTORNEY: As a named inventor, I h business in the Patent and	MBER	rnational filing date of this ap FILING DATE nt the following attorney(s)	pplication:						
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POWER OF ATTORNEY: As a named inventor, I in business in the Patent and Custome Send Correspondence to HEWLETT-PACKARD Contellectual Property Addressed P.O. Box 272400 Fort Collins, Colorado I hereby declare that made on information the knowledge that wor both, under Section may jeopardize the variable. Full Name of Inventor: Karenary in the Knowledge in the variable of the v	mereby appoir Trademark O er Number [to: COMPANY dministration 80527-2400 all statem and belief willful false on 1001 of alidity of the	rnational filing date of this application or any particular filing date of the United application or any particular filing date of the United application or any particular filing date of the United filing date of this application of this application date of this app	and/or agent(s) to prose Place Customer Number Bar Code Label here Direct Telephon Alexander J. Ne (970) 898-4931 Try own knowledge s; and further that the Ke so made are pun States Code and the tent issued thereon. Citizenship: U:	(patented/pending/abandoned) secute this application and transact all e Calls To: audeck 1 are true and that all statements nese statements were made with hishable by fine or imprisonment, hat such willful false statements					
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DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10006879-1

	Full Name of # 2 joint inventor:	David W. QUINT		Citizenship:	USA			
	Residence:	esidence: 2722 High Plains Court, Fort Collins, CO 80526						
	Post Office Address:	s: same as residence						
	David W. S		2-1	9/01				
	Inventor's Signature	Y	Date					
	Full Name of # 3 joint inventor:	Quan Qi		Citizenship:	USA			
	Residence:	907 Deerhurst Circle, Fort Collins, CO 80525						
	Post Office Address:	same as residence						
	2m 2	2/	2,	19/01				
	Inventor's Signature		Date					
	Full Name of # 4 joint inventor:			Citizenship:				
	Residence:							
	Post Office Address:							
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	Inventor's Signature		Date					
i não								
	Full Name of # 5 joint inventor:			Citizenship:_				
	Residence:							
	Post Office Address:							
	Inventor's Signature		Date					
	Full Name of # 6 joint inventor:	:		Citizenship:_				
	Residence:							
	Post Office Address:							
	Inventor's Signature							
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	Full Name of # 7 joint inventor:			Citizenship:_				
	Residence:							
	Post Office Address:							
	Inventor's Signature		Date					
								
	Full Name of # 8 joint inventor			Citizenship:				
	Residence:			Oursensiih:				
	Post Office Address:							
	Inventor's Signature		Date					